

Public Gas Company

(Name of Utility)

Entire Service Area
FOR _____
Community, Town or City
1
P.S.C. KY. NO. _____
43rd Revised SHEET NO. 1
1
CANCELLING P.S.C. KY. NO. _____
42nd Revised SHEET NO. 1
1

RATES AND CHARGES

Applies to: All Customers
Rate, Monthly:

			Base Rate	Gas Cost	Rate per Unit (Mcf)
First	0 to 1 Mcf	Minimum Bill	3.2705	9.2912	12.5617
All Over	1 Mcf		2.1505	9.2912	11.4417

DATE OF ISSUE September 27, 2007
Month / Date / Year
DATE EFFECTIVE November 1, 2007
Month / Date / Year
ISSUED BY Bert R. Layne 
(Signature of Officer)
TITLE Treasurer
BY AUTHORITY OF ORDER OF THE PUBLIC SERVICE COMMISSION
IN CASE NO. 2007-00423 DATED _____